

EXHIBIT C

12/15/1989
09:30:14

DEPARTMENT OF ECOLOGY
ENVIRONMENTAL REPORT TRACKING SYSTEM
INITIAL REPORT/FOLLOWUP

PAGE 1 OF 2

COORDINATOR: ELIN ABRAMSON

DATE/TIME REC'D: 12/08/1989 15:00:00

REPORT #: 15

REPORT TYPE: INITIAL

REGION CODE: N

DETAILS RECEIVED ON REPORTER:

OR ANONYMOUS:

GIL HASELBERGER
EPA REGION 10
SEATTLE

WA 98191-0000

BEST TIME TO
RETURN CALL:

442-1094
SILVER HAYES - CONTACT <442-2584>

DETAILS RECEIVED ON INCIDENT:

WATER WAY INFORMATION:

COUNTY CODE: *SNOHOMISH*

DESCRIPTION EVERETT
OF INCIDENT FACILITY ON SITE USED FOR STORAGE OF PCBs IN VIOLATION OF
LOCATION: 40CFR761.65(B)

DETAILS ON ALLEGED VIOLATOR:

CONTACT'S NAME:

ALLEGED VIOLATOR'S NAME & ADDRESS:

RON MINER, GENERAL MANAGER NORD COMPANY,
P.O. BOX 1187
EVERETT, WA 98206-0000

TELEPHONE NUMBER:

ADDITIONAL INFORMATION REGARDING ALLEGED VIOLATOR:

300 WEST MARINE VIEW DRIVE, EVERETT

DESCRIPTION OF CONTAMINANT

MEDIA: 00 OTHER
MATERIAL: OIL/PETROLEUM

IMPROPER STORE
PCB STORAGE

SOURCES: 00 UNSPECIFIED SOURCE
00 UNSPECIFIED SOURCE

COMMENTS: PCB CAPACITORS UNLABELED, INADEQUATE ROOFING TO PREVENT RAIN FROM
REACHING PCBs AND INADEQUATE FLORING, NO DRAIN VALVES, NOT LOCATED AT
SITE THAT IS BELOW 100YR. FLOOD PLAIN. INSPECTION ON 6/27/89

CONTINUED ON NEXT PAGE

12/15/1989
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DEPARTMENT OF ECOLOGY
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PAGE 2 OF 2

PROGRAM & SECTION HEAD:

REFERRED TO
FOR REVIEW:

HWIC

LEE DORIGANNEN

INTERNAL REFERRAL

DATE ASSIGNED:

DATE DUE:

NAME OF STAFF PERSON:

Robert Friedman-Thomas / Wolke Peck

IMPACT CODE:

(H=HUMAN, E=ENVIRONMENT OR B=BOTH)

ADDITIONAL INFORMATION:

large industrial facility, warrants full inspection

###, suspect organics, phendos, PCB's, based on general practices

historic to wood fabrication industries + EPA/TSCA inspection report.

CROSS-REFERENCES
TO OTHER SYSTEMS:

COMPLETED DATE: 29 Mar 90 *WHP*

4/6/90 - contacted Eileen Hayes - EPA has virtually closed the book on this PCB issue. The capacitors have been removed from the site + EPA is awaiting the disposal certificates. This letter was generated from a routine site inspection + was only a "bookkeeping" violation. RFT

W A D 98 176565-1

II. Waste Designated By:
RCRA/State _____ SO
State Only _____
Non-Regulated/Non-Handler/Protective Filing _____

III. Exemption Status:
RCRA Exempt Recycler _____
State Exempt Recycler _____
Below QEL _____
Other _____

IV. Handling
Emergency _____
Remedial Action _____
One-Time-Only _____
Other _____

DEPARTMENT USE ONLY

NOTIFICATION OF DANGEROUS WASTE ACTIVITIES

(send to) Attn: DW Notifications
Washington State Department of Ecology
M/SPV-11 Olympia, WA. 98504-8711
(206) 459- /6305/6306

Init.: _____ Date: _____ Region: _____
EPA: _____ Date: _____ Copy: _____
Input: _____ Update: _____ Ack: _____
DEPARTMENT USE ONLY

1. ☒ A. FIRST NOTIFICATION
☐ B. REVISED NOTIFICATION (enter current I.D.# in upper left)
revisions effective: MO. / DAY / YR
☐ C. WE REQUEST TO HAVE OUR I.D.# WITHDRAWN (enter current I.D.# assigned to you in section 99 in upper left)
☐ D. REACTIVATE OUR NOTIFICATION (complete all sections)
☐ E. SITE CLOSED (We are no longer conducting business at this location and want our I.D. No. cancelled)

2.A. WASHINGTON STATE DEPARTMENT OF REVENUE REGISTRATION (TAX) NUMBER
600-627-882

2.B. SIC CODE(S)
PRIMARY SECONDARY OTHER

3. NAME OF COMPANY
WORD

4. MAILING ADDRESS
STREET, P.O. BOX, OR RURAL ROUTE & BOX NO.
P.O. BOX 1187
CITY OR TOWN STATE ZIP CODE
EVERETT WA 98206

5. LOCATION OF WASTE ACTIVITIES (Installation)
DESCRIPTION OF PHYSICAL LOCATION (Follow Instructions Carefully)
300 W MARINE VIEW
CITY OR TOWN STATE ZIP CODE
EVERETT WA 98206

6. COUNTY WHERE THIS INSTALLATION IS LOCATED
SNOWHOMISH 061

7. DANGEROUS WASTE ACTIVITIES YOUR BUSINESS IS CONDUCTING
(Read & Follow Instructions Carefully—Enter an "X" in appropriate box(es))

A. ☒ GENERATOR
B. ☐ TRANSPORTER (complete this section only if YOU are transporting waste for hire or your own waste to an off-site facility)
(1) ☐ We Transport Waste For Hire
(2) Modes of Transport YOU Operate
(a) ☐ HIGHWAY (b) ☐ AIR (c) ☐ RAIL
(d) ☐ WATER (e) ☐ OTHER _____

C. ☐ WASTE MANAGEMENT FACILITY (TSD) (refer to definitions in instructions)
(1) ☐ TREATMENT
(2) ☐ STORAGE
(3) ☐ DISPOSAL
(4) ☐ WE ACCEPT OFF-SITE WASTES

D. ☐ UNDERGROUND INJECTION

8. CONTACT PERSON
NAME (last), (first)
JOHNSON ROBERT

TITLE PHONE NO. (area code & number)
FACILITIES MANAGER 206-259-9292

9A. OWNERSHIP (Legal Owner(s) of this Company)
PRIVATELY HELD CORP

9B. OWNERSHIP (Legal Owner(s) of site (Property))
SAME

10. TYPE OF OWNERSHIP (enter letter code in box)
P

Description of Waste(s)		C. Hazardous Waste Number (refer to WAC 173-303)	D. Estimated or Actual Annual Waste Quantity	E. WEIGHT CODE
		WT 02D 001	20000	P
1				
2				
3				
4				
5				
6				
7				
8				
9				
10				

12. ESTIMATED MAXIMUM QUANTITY of all wastes, listed above, to be produced in any given month or per processing batch.

A. <input type="checkbox"/> Batch Frequency <u>30 days</u>	QUANTITY	WEIGHT	B. <input checked="" type="checkbox"/> PER MONTH	QUANTITY	WEIGHT
	<u>10000</u>	<u>P</u>		<u>10000</u>	
		CODE			CODE

13. COMMENTS (Enter Information by Section & Line Number—See Instructions)

14. FORMS AND INFORMATION REQUEST

(Check the box(es) of those items desired and indicate how many)

- | | |
|---|---|
| A. <input type="checkbox"/> NOTIFICATION FORM | B. <input type="checkbox"/> PART A PERMIT FORM FOR TSD FACILITIES |
| C. <input type="checkbox"/> BIOLOGICAL TEST PROCED. | D. <input type="checkbox"/> GENERATOR ANNUAL REPORT FORM |
| E. <input type="checkbox"/> CHEMICAL TEST PROCED. | F. <input type="checkbox"/> TSD FACILITY ANNUAL REPORT/UNMANIFESTED WASTE REI |
| G. <input type="checkbox"/> DANGEROUS WASTE LEGISLATION (RCW 70.105) AND REGULATIONS (WAC 173-303) | |
| H. <input type="checkbox"/> DANGEROUS WASTE FEES LEGISLATION (RCW 70.105A) & REGULATION (WAC 173-305) | |
| I. <input type="checkbox"/> OTHER (specify) _____ | |

15. CERTIFICATION

I certify under penalty of law that I have personally examined and am familiar with the information submitted in this and all attached documents, and that based on my inquiry of those individuals immediately responsible for obtaining the information, I believe that the submitted information is true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment.

SIGNATURE: <u>Ronald J. Miner</u>	OFFICIAL TITLE (Print): <u>GENERAL MGR.</u>	DATE SIGNED: <u>1/5/8</u>
PRINTED NAME: <u>RONALD J. MINER</u>		

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.

Manifest Document No.

2. Page 1 of 1

Information in the shaded areas is not required by Federal law.

3. Generator's Name and Mailing Address

ALDOR INC
BOX 1127 EUREKA CA 95506

4. Generator's Phone

(706) 259-7292

5. Transporter's Company Name

6.

US EPA ID Number

7. Transporter's Company Name

8.

US EPA ID Number

9. Designated Facility Name and Site Address

10.

US EPA ID Number

LIIYKIAO PET
2344 PORT OF TACOMA RD
TACOMA WA 98401

WA0002749347
WA0027543032

11. US DOT Description (Including Proper Shipping Name, Hazard Class and ID Number)

12. Containers

13. Total Quantity

14. Unit Wt/Vol

a. ☒ WASTE PAINT RELATED MATERIALS
FLAMMABLE LIQ NA 1263
RQ 100 #

b. ☒ WASTE ACETONE UN 1090
FLAMMABLE MATERIAL
RQ 5000 #

c. ☒ WASTE PAINT RELATED MATERIALS
FLAMMABLE SLOUGH NA 1263
RQ 100 #

d. ☐

No.

Type

Quantity

Unit Wt/Vol

2

Dm

110

G

1

Dm

40

G

1

Dm

5

G

15. Special Handling Instructions and Additional Information

IN CASE OF ACCIDENTAL SPILL OR RELEASE OF RQ AMOGENIS
IMMEDIATELY CONTACT - NATIONAL RESPONSE CENTER
AT 1-800-247-4802

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations.

If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.

Printed/Typed Name

Signature

Month Day Year
1 13 87

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year
1 13 87

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.

Printed/Typed Name

Signature

Month Day Year
10 13 87

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. **WAD 981765654** Manifest Document No. **01-08-2**

2. Page 1 of 1 Information in the shaded areas is not required by Federal law.

3. Generator's Name and Mailing Address

NORD INC.
Box 1187 EVERETT WA. 98206

4. Generator's Phone **(206) 259-9292**

5. Transporter 1 Company Name

OAK HARBOR FREIGHT

6. US EPA ID Number

WAD 002788347

7. Transporter 2 Company Name

8. US EPA ID Number

9. Designated Facility Name and Site Address

SOL-PRO/LILYBLAD PETROLEUM
2244 PORT OF TACOMA RD.
TACOMA WA 98401

10. US EPA ID Number

WAD 027543032

A. State Manifest Document Number

B. State Generator's ID

C. State Transporter's ID

D. Transporter's Phone **244-3230**

E. State Transporter's ID

F. Transporter's Phone

G. State Facility's ID

H. Facility's Phone **206-627-2248**

11. US DOT Description (Including Proper Shipping Name, Hazard Class and ID Number)

a. **WASTE FLAMMABLE LIQUID NOS**
X FLAMMABLE LIQUID UN 1993

12. Containers

No. Type

5 DM

13. Total Quantity

250 G

14. Unit Wt/Vol

G

15. Waste No.

D001 W102

J. Additional Descriptions for Materials Listed Above

(a) SPENT SOLVENT

K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations.

Unless I am a small quantity generator who has been exempted by statute or regulation from the duty to make a waste minimization certification under Section 3002(b) of RCRA, I also certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and I have selected the method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment.

Printed/Typed Name **Robert D. Johnson** Signature **Robert D. Johnson** Month Day Year **11 8 87**

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name **Ric Johnston** Signature **Ric Johnston** Month Day Year **11 8 87**

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name Signature Month Day Year

19. Discrepancy Indication Space

1. EXPIRED MANIFEST DATE
2. MISSING RQ VALUE

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.

Printed/Typed Name **James C Ecklund** Signature **James C Ecklund** Month Day Year **11 8 87**

Returned original manifest to generator 1/10/88



Reply To
Attn of: AT-083

CERTIFIED MAIL - RETURN RECEIPT REQUESTED

NOTICE OF NONCOMPLIANCE

Frank DeVol
~~Ron Miner~~, General Manager
NORD Company, Inc.
P.O. Box 1187
Everett, Washington 98206

259-9292

Dear Mr. Miner:

This concerns the June 27, 1989 inspection of NORD Company located at 300 West Marine View Drive, Everett, Washington, which was performed by Michael R. Hoyles of the United States Environmental Protection Agency (EPA) pursuant to Section 11 of the Toxic Substances Control Act (TSCA). This inspection was conducted to determine whether activities at the facility were in compliance with EPA Regulations governing polychlorinated biphenyls (PCBs): 40 C.F.R. Part 761.

During the inspection, violations of the regulations were noted. You should be aware that violations of TSCA may result in the issuance of an administrative civil complaint and the assessment of penalties. The following identifies in detail the violations observed during the inspection.

VIOLATION ONE

REGULATION - STORAGE: 40 C.F.R. § 761.65(b) requires that any facility used for the storage of PCBs and PCB Items designated for disposal meet the following criteria:

- 1) Adequate roof and walls to prevent rain water from reaching the stored PCBs and PCB Items;
- 2) An adequate floor which has continuous curbing with a minimum six inch high curb. The floor and curbing must provide a containment volume equal to at least two times the internal volume of the largest PCB Article or PCB Container stored therein or 25 percent of the total internal volume of all PCB Containers stored therein, whichever is greater;
- 3) No drain valves, floor drains, expansion joints, sewer lines, or other openings that would permit liquids to flow from the curbed area;
- 4) Floors and curbing constructed of continuous smooth and impervious materials, such as Portland cement concrete or steel, to prevent or minimize penetration of PCBs; and
- 5) Not located at a site that is below the 100-year flood water elevation.

Noted by inspection

↑
VIOLATION ONE: The pole where the three out of service pole-mounted PCB Capacitors were stored did not meet the requirements of a PCB Storage for disposal area.

VIOLATIONS TWO THROUGH EIGHT

REGULATION - MARKING: 40 C.F.R. § 761.40 requires that all PCB Containers, PCB Transformers, Large PCB Capacitors, and PCB storage for disposal areas be marked in accordance with 40 C.F.R. § 761.45. In general, a 6 inch by 6 inch PCB label is required, although the label may be reduced in size proportionately to a minimum of 2 inches by 2 inches for equipment too small to accommodate the standard 6 inch by 6 inch label.

VIOLATIONS TWO THROUGH SEVEN: The following six PCB Capacitors were not marked with the required PCB label.

VIOLATIONS TWO THROUGH FOUR:

Three pole-mounted PCB Capacitors, no model or serial number identified, located in the parking lot south of the facility and west of the warehouse.

VIOLATIONS FIVE THROUGH SEVEN:

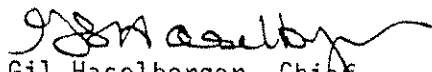
Three out of service pole-mounted PCB capacitors, no model or serial number identified, located on the third pole west of the warehouse.

VIOLATION EIGHT: The area where three out of service pole-mounted PCB Capacitors were located, which are the subject of Violations Five through Seven, was not marked with the PCB label required for a storage area.

EPA has reviewed the information submitted by your company documenting that the PCB Capacitors were removed and disposed of. We appreciate your prompt attention in this matter. Within thirty days of your receipt of this letter, you should also provide EPA with copies of disposal certificates for the PCB Capacitors.

If you have any questions regarding this letter, please contact Eileen Hayes of my staff. She can be reached at EPA Region 10, Pesticides and Toxic Substances Branch, Mail Stop AT-083, 1200 Sixth Avenue, AT-083, Seattle, Washington; telephone (206) 442-2584.

Sincerely,


Gil Haselberger, Chief
Toxic Substances Section

cc: John Foley, EPA HQ
State Ag Dept.